

AMENDMENT IN THE NATURE OF A SUBSTITUTE
TO H.R. 918
OFFERED BY MR. BILIRAKIS OF FLORIDA

Strike all after the enacting clause and insert the following:

1 SECTION 1. SHORT TITLE.

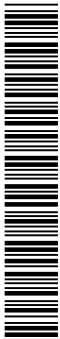
2 This Act may be cited as the “Patient Navigator Out-
3 reach and Chronic Disease Prevention Act of 2004”.

4 SEC. 2. PATIENT NAVIGATOR GRANTS.

5 Subpart V of part D of title III of the Public Health
6 Service Act (42 U.S.C. 256) is amended by adding at the
7 end the following:

8 “SEC. 340A. PATIENT NAVIGATOR GRANTS.

9 “(a) GRANTS.—The Secretary, acting through the
10 Administrator of the Health Resources and Services Ad-
11 ministration, may make grants to eligible entities for the
12 development and operation of demonstration programs to
13 provide patient navigator services to improve health care
14 outcomes. The Secretary shall coordinate with, and ensure
15 the participation of, the Indian Health Service, the Na-
16 tional Cancer Institute, the Office of Rural Health Policy,
17 and such other offices and agencies as deemed appropriate



1 by the Secretary, regarding the design and evaluation of
2 the demonstration programs.

3 “(b) USE OF FUNDS.—A condition on the receipt of
4 a grant under this section is that the grantee agree to
5 use the grant to recruit, assign, train, and employ patient
6 navigators who have direct knowledge of the communities
7 they serve to facilitate the care of individuals, including
8 by performing each of the following duties:

9 “(1) Acting as contacts, including by assisting
10 in the coordination of health care services and pro-
11 vider referrals, for individuals who are seeking pre-
12 vention or early detection services for, or who fol-
13 lowing a screening or early detection service are
14 found to have a symptom, abnormal finding, or diag-
15 nosis of, cancer or other chronic disease.

16 “(2) Facilitating the involvement of community
17 organizations providing assistance to individuals who
18 are at risk for or who have cancer or other chronic
19 diseases to receive better access to high-quality
20 health care services (such as by creating partner-
21 ships with patient advocacy groups, charities, health
22 care centers, community hospice centers, other
23 health care providers, or other organizations in the
24 targeted community).



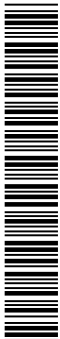
1 “(3) Notifying individuals of clinical trials and
2 facilitating enrollment in these trials if requested
3 and eligible.

4 “(4) Anticipating, identifying, and helping pa-
5 tients to overcome barriers within the health care
6 system to ensure prompt diagnostic and treatment
7 resolution of an abnormal finding of cancer or other
8 chronic disease.

9 “(5) Coordinating with the relevant health in-
10 surance ombudsman programs to provide informa-
11 tion to individuals who are at risk for or who have
12 cancer or other chronic diseases about health cov-
13 erage, including private insurance, health care sav-
14 ings accounts, and other publicly funded programs
15 (such as Medicare, Medicaid, and the State chil-
16 dren’s health insurance program).

17 “(6) Conducting ongoing outreach to health dis-
18 parity populations, including the uninsured, rural
19 populations, and other medically underserved popu-
20 lations, in addition to assisting other individuals who
21 are at risk for or who have cancer or other chronic
22 diseases to seek preventative care.

23 “(c) GRANT PERIOD.—



1 “(1) IN GENERAL.—Subject to paragraphs (2)
2 and (3), the Secretary may award grants under this
3 section for periods of not more than 3 years.

4 “(2) EXTENSIONS.—Subject to paragraph (3),
5 the Secretary may extend the period of a grant
6 under this section, except that—

7 “(A) each such extension shall be for a pe-
8 riod of not more than 1 year; and

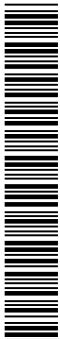
9 “(B) the Secretary may make not more
10 than 4 such extensions with respect to any
11 grant.

12 “(3) END OF GRANT PERIOD.—In carrying out
13 this section, the Secretary may not authorize any
14 grant period ending after September 30, 2010.

15 “(d) APPLICATION.—

16 “(1) IN GENERAL.—To seek a grant under this
17 section, an eligible entity shall submit an application
18 to the Secretary in such form, in such manner, and
19 containing such information as the Secretary may
20 require.

21 “(2) CONTENTS.—At a minimum, the Secretary
22 shall require each such application to outline how
23 the eligible entity will establish baseline measures
24 and benchmarks that meet the Secretary’s require-
25 ments to evaluate program outcomes.



1 “(e) UNIFORM BASELINE MEASURES.—The Sec-
2 retary shall establish uniform baseline measures in order
3 to properly evaluate the impact of the demonstration
4 projects under this section.

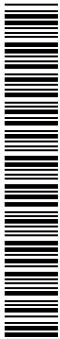
5 “(f) PREFERENCE.—In making grants under this
6 section, the Secretary shall give preference to eligible enti-
7 ties that demonstrate in their applications plans to utilize
8 patient navigator services to overcome significant barriers
9 in order to improve health care outcomes in their respec-
10 tive communities.

11 “(g) COORDINATION WITH OTHER PROGRAMS.—The
12 Secretary shall ensure coordination of the demonstration
13 grant program under this section with existing authorized
14 programs in order to facilitate access to high-quality
15 health care services.

16 “(h) STUDY; REPORTS.—

17 “(1) FINAL REPORT BY SECRETARY.—Not later
18 than 6 months after the completion of the dem-
19 onstration grant program under this section, the
20 Secretary shall conduct a study of the results of the
21 program and submit to the Congress a report on
22 such results that includes the following:

23 “(A) An evaluation of the program out-
24 comes, including—



1 “(i) quantitative analysis of baseline
2 and benchmark measures; and

3 “(ii) aggregate information about the
4 patients served and program activities.

5 “(B) Recommendations on whether patient
6 navigator programs could be used to improve
7 patient outcomes in other public health areas.

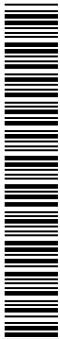
8 “(2) INTERIM REPORTS BY SECRETARY.—The
9 Secretary may provide interim reports to the Con-
10 gress on the demonstration grant program under
11 this section at such intervals as the Secretary deter-
12 mines to be appropriate.

13 “(3) INTERIM REPORTS BY GRANTEES.—The
14 Secretary may require grant recipients under this
15 section to submit interim reports on grant program
16 outcomes.

17 “(i) RULE OF CONSTRUCTION.—This section shall
18 not be construed to authorize funding for the delivery of
19 health care services (other than the patient navigator du-
20 ties listed in subsection (b)).

21 “(j) DEFINITIONS.—In this section:

22 “(1) The term ‘eligible entity’ means a public
23 or nonprofit private health center (including a Fed-
24 erally qualified health center (as that term is defined
25 in section 1861(aa)(4) of the Social Security Act)),



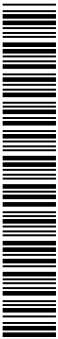
1 a health facility operated by or pursuant to a con-
2 tract with the Indian Health Service, a hospital, a
3 cancer center, a rural health clinic, an academic
4 health center, or a nonprofit entity that enters into
5 a partnership or coordinates referrals with such a
6 center, clinic, facility, or hospital to provide patient
7 navigator services.

8 “(2) The term ‘health disparity population’
9 means a population that, as determined by the Sec-
10 retary, has a significant disparity in the overall rate
11 of disease incidence, prevalence, morbidity, mor-
12 tality, or survival rates as compared to the health
13 status of the general population.

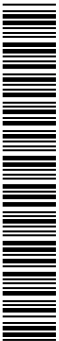
14 “(3) The term ‘patient navigator’ means an in-
15 dividual who has completed a training program ap-
16 proved by the Secretary to perform the duties listed
17 in subsection (b).

18 “(k) AUTHORIZATION OF APPROPRIATIONS.—

19 “(1) IN GENERAL.—To carry out this section,
20 there are authorized to be appropriated \$2,000,000
21 for fiscal year 2006, \$5,000,000 for fiscal year
22 2007, \$8,000,000 for fiscal year 2008, \$6,500,000
23 for fiscal year 2009, and \$3,500,000 for fiscal year
24 2010.



1 “(2) AVAILABILITY.—The amounts appro-
2 priated pursuant to paragraph (1) shall remain
3 available for obligation through the end of fiscal year
4 2010.”.



Amend the title so as to read: “A bill to amend the Public Health Service Act to authorize a demonstration grant program to provide patient navigator services to reduce barriers and improve health care outcomes, and for other purposes.”.

